POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*hr*	67864	4/6/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	5.5	69134	6-9-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date							
Final	Original	6/23/02	10/30/02	7 28 03					
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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